

ELK GROVE FIRE DEPARTMENTPlan Submittal-8400 Laguna Palms Way, Elk Grove CA 95758
TEL: (916) 478-3653 FAX: (916) 691-6411**DATE RECEIVED****BUILDING PROJECT INFORMATION****PLEASE COMPLETE THE TOP PORTION OF FORM – PRINT CLEARLY****REQUIRED:** Parcel Number: _____ - _____ - _____

Project Name: _____

Project Address: _____ Suite: _____ City: **ELK GROVE** Zip: **95624/95757/95758**

Scope of work: _____

APPLICANT/CONTACT:

Name: _____ Tel (Day): (_____) _____ - _____

Company Name: _____ Tel: (_____) _____ - _____

Address: _____ FAX: (_____) _____ - _____

City: _____ Zip: _____ E-mail: _____

☐ PLEASE CHECK IF YOU WOULD LIKE COMMENTS E-MAILED**Fill in Construction and Building Code Classification**

Building Construction Type: _____ Occupancy Type: _____ Code Edition Used: CBC _____ CFC _____

APPLICABLE FEES MUST BE PAID AT TIME OF PLAN SUBMITTAL

1. Plan check number required for all resubmittals and inquiries.
2. Standard turn around time for first submittal is 15 business days (3 weeks).
3. Disapproved check set of plans will be discarded after seven business days if not picked up by applicant.

NO REFUNDS**PLAN SUBMITTALS ARE VALID FOR ONE YEAR ONLY FROM THE PLAN CHECK DATE****FINAL SUBMITTAL MUST BE ACCOMPANIED WITH DISKETTE****NOTE:** All CIVIL (Site Plans), ARCHITECTURAL (Floor Plans), and SUBDIVISION Plans WILL NOT receive FINAL SIGNATURE and released until the digital drawing file of entire project is submitted.**OFFICE USE ONLY BELOW****ENGINEERING SITE PLAN CHECK**

____ EPP - Engineering (SITE) Plan Check Total # of Bldgs: _____
 ____ ULI - Riser Connection Stub-in
 ____ UGS - Underground (fire sprinkler) TOTAL No. of FDC's: _____

LOT SPLITS

____ LSA - Lot Split of 1 - 4
 ____ LSB - Lot Split of 5 and > TOTAL No. of Lots: _____

NEW CONSTRUCTION

____ NBP - New Building Plan Check TOTAL Sq. Ft. _____

TENANT IMPROVEMENT CONSTRUCTION

____ TIP - Tenant Improvement Plan Check
 TOTAL Sq. Ft. _____
 ____ TIU - Tenant Improvement Plan Check (<1,700 sq. ft.)
 TOTAL Sq. Ft. _____

ALARM SYSTEMS

____ FAL - Fire Alarm System TOTAL No. of Devices: _____
 ____ FTP - Sprinkler Monitoring System/Kitchen Hood Connection to
 FACP/ HVAC Duct Detector(s)

FIRE SUPPRESSION SYSTEMS

____ SPA - Fire Sprinkler System (<25 heads per riser)
 ____ SPB - Fire Sprinkler System (26 - 100 heads per riser)
 ____ SPC - Fire Sprinkler System (101 heads & > per riser)
 ____ HAP - Halon & Special Extinguish System Plan Check/Knox
 Products/Medical Gas/Spray Booth
 ____ RSP - Residential Sprinkler System (Single Dwelling)
 ____ STN - Standpipe(s) TOTAL No. of Risers _____

OTHER

____ AGF - Above Ground Flammable/Combustible Liquid Tank/Cylinders
 ____ AGH - Above Ground Hazardous Material Tank
 ____ AGR - Above Ground Flammable/Combustible Liquid Tank Removal
 ____ PAP - Outdoor Public Assemblies / Parades
 ____ RCA - Pre-inspection - Residential Care Home
 ____ SFP - Special Fire Plan Check
 ____ SFR - Single Family Res. (Site) / 850 Insp. Request / Mobile Home
 ____ SFX - Special Reviews / Tents / Duplicate Plans
 ____ **Other (Specify):** _____

____ **RAK** - Minimum Intake Fee/Racks/Haz Mat Review/Residential Sales
 Trailer/Gates/Addressing Plans/Pool/Cell sites or
 equipment/Transformers